



DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

English Language Declaration

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: TREATMENT OF

NEUROMUSCULAR DISORDERS AND CONDITIONS WITH DIFFERENT BOTULINUM SEROTYPE

the specification of which

(check one)

☒ X is attached hereto.

☐ was filed on _____ as Application Serial No. _____ and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

			Priority Claimed	
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)
_____	_____	(patented, pending, abandoned)
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
_____	_____	(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Robert J. Baran
Reg. No. 25,806

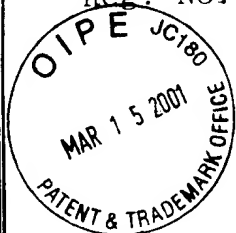
Walter A. Hackler
Registration No. 27,792

Howard R. Lambert
Reg. No. 27,206

Martin A. Voet
Reg. No. 25,802

Send Correspondence to:
Walter A. Hackler
2372 S.E. Bristol, Suite B
Santa Ana Heights, CA 92707
U.S.A.

Direct Telephone Calls to:
Walter A. Hackler
(714) 851-5010



Full Name of Sole or First Inventor:

K. Roger Aoki

Inventor's Signature:

✓ *K. Roger Aoki*

Date Signed:

✓ 9/22/93

Residence (City, State and/or Country):

25472 Earhart Road, Laguna Hills, CA 92653

Citizenship:

USA

Post Office Address (Street, City, State, Zip Code, Country):

✓

Full Name of Second Joint Inventor (if any):

Michael W. Grayston

Second Inventor's Signature:

✓ *Michael W. Grayston*

Date Signed:

✓ 9/28/93

Residence (City, State and/or Country):

12 Mandarin, Irvine, CA 92714

Citizenship:

USA

Post Office Address (Street, City, State, Zip Code, Country):

✓

Full Name of Third Joint Inventor (if any):

Steven R. Carlson

Third Inventor's Signature:

✓ *Steven R. Carlson*

Date Signed:

✓ 9/22/93

Residence (City, State and/or Country):

29991 Happy Sparrow Lane, Laguna Niguel, CA 92677

Citizenship:

USA

Post Office Address (Street, City, State, Zip Code, Country):

✓



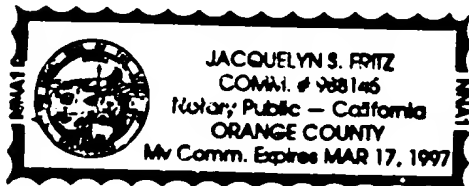
Full Name of Fourth Joint Inventor (if any): Judith M. Leon	
Fourth Inventor's Signature: <i>Judith M. Leon</i>	Date Signed: ✓ 9/22/93
Residence (City, State and/or Country): 29992 Running Deer Lane, Laguna Niguel, CA 92677	Citizenship: USA
Post Office Address (Street, City, State, Zip Code, Country): ✓	
Full Name of Fifth Joint Inventor (if any):	
Fifth Inventor's Signature:	Date Signed:
Residence (City, State and/or Country):	Citizenship:
Post Office Address (Street, City, State, Zip Code, Country):	
Full Name of Sixth Joint Inventor (if any):	

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

No. 5193

State of California
 County of Orange
 On 9/22/93 before me, Jacquelyn S Fritz
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"
 personally appeared Judith M. Leon
NAME(S) OF SIGNER(S)

☐ personally known to me - OR - ☒ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Jacquelyn S Fritz
SIGNATURE OF NOTARY

OPTIONAL SECTION

CAPACITY CLAIMED BY SIGNER

Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document.

- ☐ INDIVIDUAL
- ☐ CORPORATE OFFICER(S)
- TITLE(S)
- ☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
- ☐ ATTORNEY-IN-FACT
- ☐ TRUSTEE(S)
- ☐ GUARDIAN/CONSERVATOR
- ☐ OTHER: _____

SIGNER IS REPRESENTING:

NAME OF PERSON(S) OR ENTITY(IES)

THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:

TITLE OR TYPE OF DOCUMENT _____

NUMBER OF PAGES _____ DATE OF DOCUMENT _____

SIGNER(S) OTHER THAN NAMED ABOVE _____

Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.



ASSIGNMENT

RECEIVED

JAN 3 1994

PATENT DEPT.

WHEREAS, WE, K. Roger Aoki, Michael W. Grayston, Steven R. Carlson, and Judith M. Leon, all citizens of the United States of America, residing at 25472 Earhart Road, Laguna Hills, CA 92653; 12 Mandarin, Irvine, CA 92714; 29991 Happy Sparrow Lane, Laguna Niguel, CA 92677, and 29992 Running Deer Lane, Laguna Niguel, CA 92677, respectively, have invented certain new and useful improvements in TREATMENT OF NEUROMUSCULAR DISORDERS AND CONDITIONS WITH DIFFERENT BOTULINUM SEROTYPE, for which we have executed an application for Letters Patent of the United States on _____,

WHEREAS, ALLERGAN, INC., a Delaware Corporation, 2525 Dupont Drive, Irvine, California 92715, is desirous of obtaining the entire right, title and interest in the said improvements and the said application: TREATMENT OF NEUROMUSCULAR DISORDERS AND CONDITIONS WITH DIFFERENT BOTULINUM SEROTYPE.

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) to each of us in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, we, the said inventors, do hereby acknowledge that we have sold, assigned, transferred and set over, and by these presents do hereby severally and jointly, sell, assign, transfer and set over, unto the said ALLERGAN, INC.

its successors, legal representatives and assigns, our respective rights, titles and interests, and the entire right, title, and interest throughout the world in, to and under the said improvements, and the said application and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereon and all reissues and extensions thereof, and all rights of priority under International Conventions and applications for Letters Patent which may hereafter be filed for said improvements in any country or countries foreign to the United States, and all Letters Patent which may be granted for said improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and we hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patent for said improvements to the said ALLERGAN, INC.

its successors, legal representatives and assigns, in accordance with the terms of this instrument.

AND WE HEREBY covenant and agree that we will communicate to the said ALLERGAN, INC.

its successors, legal representatives and assigns, any facts known to us respecting said improvements, and testify in any legal proceeding, sign all lawful papers, execute all divisional continuing and reissue applications, make all rightful oaths and generally do everything possible to aid the said ALLERGAN, INC.

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its successors, legal representatives and assigns, to obtain and enforce proper patent protection for said improvements in all countries.

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 22nd day of September, 1993.

State of _____) K. Roger Aoki
County of _____) ss.:

On this _____ day of _____, 19____, before me a Notary Public in and for the State and County aforesaid, personally appeared _____ known to me to be the person of that name, who signed and sealed the foregoing instrument, and acknowledged the same to be his free act and deed.

SEAL

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 28 day of SEPTEMBER, 1993.

State of _____) Michael W. Grayston
County of _____) ss.:

On this _____ day of _____, 19____, before me a Notary Public in and for the State and County aforesaid, personally appeared _____ known to me to be the person of that name, who signed and sealed the foregoing instrument, and acknowledged the same to be his free act and deed.

SEAL

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 22nd day of September, 1992.

State of _____) Steven R. Carlson
County of _____) ss.:

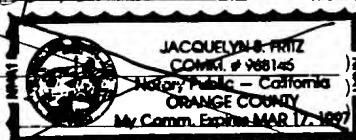
On this _____ day of _____, 19____, before me a Notary Public in and for the State and County aforesaid, personally appeared _____ known to me to be the person of that name, who signed and sealed the foregoing instrument, and acknowledged the same to be his free act and deed.

SEAL

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 22nd day of September, 1993.

State of _____) Judith M. Leon
County of _____) ss.:

On this 22 day of September, 1993, before me a Notary Public in and for the State and County aforesaid, personally appeared Judith M. Leon known to me to be the person of that name, who signed and sealed the foregoing instrument, and acknowledged the same to be his free act and deed.



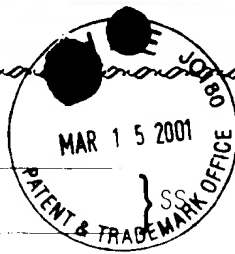
Jacquelyn S. Fritz

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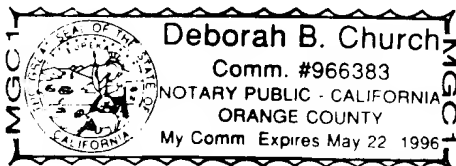
Acknowledgement

State of CALIFORNIA

County of Orange



On September 22, 1993 before me Deborah B. Church
personally appeared K. Roger Aoki



personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument
WITNESS my hand and official seal

Signature [Signature]

(This area for official seal)

ATTENTION NOTARY Although the information requested below is **OPTIONAL**, it could prevent fraudulent attachment of this certificate to another document

THIS CERTIFICATE MUST BE ATTACHED
TO THE DOCUMENT DESCRIBED AT RIGHT:

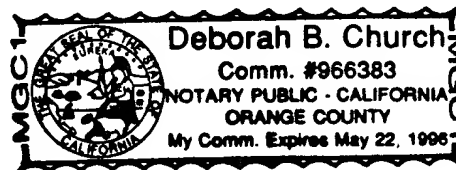
TT-1100 (11/90)

Title or Type of Document Assignment (Docket 1947)
Number of Pages 2 Date of Document Multiple
Signer(s) Other Than Named Above Multiple

Acknowledgement

State of CALIFORNIA

County of ORANGE



On September 28, 1993 before me Deborah B. Church
Notary Public
personally appeared Michael W. Grayston

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument
WITNESS my hand and official seal

Signature [Signature]

(This area for official seal)

ATTENTION NOTARY Although the information requested below is **OPTIONAL**, it could prevent fraudulent attachment of this certificate to another document

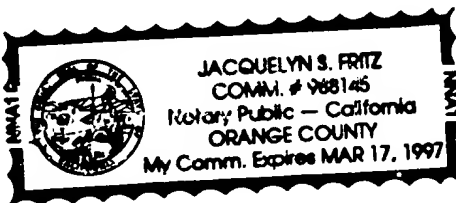
THIS CERTIFICATE MUST BE ATTACHED
TO THE DOCUMENT DESCRIBED AT RIGHT:

Title or Type of Document Assignment (Docket 1947)
Number of Pages 2 Date of Document Multiple
Signer(s) Other Than Named Above Multiple

Acknowledgement

State of CALIFORNIA

County of ORANGE



On 9/22/93 before me Jacquelyn S. Fritz
personally appeared Judith M. Leon

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

Signature Jacquelyn S. Fritz

(This area for official seal)

ATTENTION NOTARY Although the information requested below is **OPTIONAL**, it could prevent fraudulent attachment of this certificate to another document

THIS CERTIFICATE MUST BE ATTACHED
TO THE DOCUMENT DESCRIBED AT RIGHT:

Title or Type of Document _____
Number of Pages _____ Date of Document _____
Signer(s) Other Than Named Above _____

REF 6723 FRAME 554

Acknowledgement

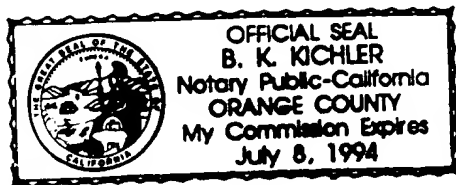
State of CALIFORNIA

County of ORANGE

} SS.

On 9/22/93 before me, B.K. KICHLER

personally appeared STEVEN R. CARLSON



(This area for official seal)

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature B. K. Kichler

ATTENTION NOTARY: Although the information requested below is **OPTIONAL**, it could prevent fraudulent attachment of this certificate to another document.

THIS CERTIFICATE MUST BE ATTACHED
TO THE DOCUMENT DESCRIBED AT RIGHT:

Title or Type of Document _____

Number of Pages _____ Date of Document _____

Signer(s) Other Than Named Above _____

TT-1100 (11/90)

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